



06-15-07

Atty. Dkt. No. 037607-0251

AFB

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants: Kemper et al.
Title: SYSTEM AND METHOD FOR
VERIFYING LOAN DATA AT
DELIVERY
Appl. No.: 10/737,298
Filing Date: 12/16/2003
Examiner: Hamilton, Lalita M.
Art Unit: 3691
Confirmation No.: 7677

CERTIFICATE OF EXPRESS MAILING	
I hereby certify that this correspondence is being deposited with the United States Postal Service's "Express Mail Post Office To Addressee" service under 37 C.F.R. § 1.10 on the date indicated below and is addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.	
EV 962275340 US (Express Mail Label Number)	June 14, 2007 (Date of Deposit)
Deborah A. Kocorowski (Printed Name)	
<i>Deborah A. Kocorowski</i> (Signature)	

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Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

**NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD
OF PATENT APPEALS AND INTERFERENCES**

The Applicants hereby appeal to the Board of Patent Appeals and Interferences from the decision of the Examiner in the Final Office Action dated December 18, 2006, and in the Advisory Action dated March 15, 2007, finally rejecting Claims 1-18 and 50-52.

- ☒ [X] The Applicants hereby petition for an extension of time under 37 C.F.R. § 1.136(a) for the total number of months checked below:
- ☒ [X] Notice of Appeal Fee
- ☒ [X] To be paid as detailed below

06/15/2007 BABRAHA1 00000049 10737298

01 FC:1401	500.00 OP
02 FC:1253	1020.00 OP

The required fees are calculated below:

<input checked="" type="checkbox"/>	Notice of Appeal Fee	\$500.00
<input checked="" type="checkbox"/>	Extension for response filed within the third month:	\$1,020.00
<input type="checkbox"/>	Extension:	\$0.00
	FEE TOTAL:	\$1,520.00
<input type="checkbox"/>	Small Entity Fees Apply (subtract ½ of above):	\$0.00
	TOTAL FEE:	\$1,520.00

A credit card payment form in the amount of \$1,520.00 is enclosed.

The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16, 1.17 and 41.20, or credit any overpayment, to Deposit Account No. 19-0741. Should no proper payment be enclosed herewith, as by the credit card payment form being unsigned, providing incorrect information resulting in a rejected credit card transaction, or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 19-0741.

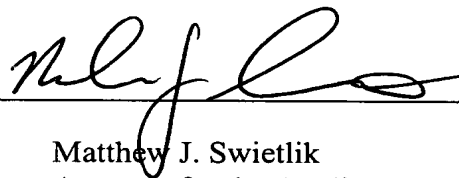
Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date

6/14/2007

By



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